

**CITY OF NEW ORLEANS CIVIL SERVICE DEPARTMENT  
AUTOMOTIVE MECHANIC WORK EXPERIENCE FORM**

**NAME:** \_\_\_\_\_ **SS#** \_\_\_\_\_ **DATE** \_\_\_\_\_

Please print the information on this form. Be specific and complete. This information will be verified. Beginning with your most recent job, list jobs you have held as a mechanic. Names and phone numbers of previous supervisors must be listed. Only verifiable experience will be counted. References will be checked.

**JOB 1:**

JOB TITLE: \_\_\_\_\_ (MONTH/YEAR) (MONTH/YEAR)  
START DATE \_\_\_\_\_ END DATE \_\_\_\_\_

NAME & ADDRESS OF COMPANY: \_\_\_\_\_

NAME OF SUPERVISOR: \_\_\_\_\_ PHONE# \_\_\_\_\_

DESCRIPTION OF  
DUTIES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE CHECK TO INDICATE TYPE OF DUTIES:**

ENGINE/MECHANICAL \_\_\_\_\_ BRAKES \_\_\_\_\_ ELECTRICAL \_\_\_\_\_ COOLING \_\_\_\_\_  
IGNITION \_\_\_\_\_ DRIVE TRAIN \_\_\_\_\_ HYDRAULIC \_\_\_\_\_ INDUCTION (FUEL) \_\_\_\_\_  
FRONT END \_\_\_\_\_ PNEUMATIC \_\_\_\_\_

**PLEASE CHECK TO INDICATE TYPE OF EQUIPMENT WORKED ON:**

COMPACT OR INTERMEDIATE CARS \_\_\_\_\_ FULL SIZE CARS \_\_\_\_\_ TRUCKS OR  
VANS LESS THAN 8,500 LBS.G.V.W. \_\_\_\_\_ TRUCKS OR VANS 8,500 TO  
20,000 LBS G.V.W. \_\_\_\_\_ TRUCKS OR VANS GREATER THAN 20,000 LBS  
G.V.W. \_\_\_\_\_ CONSTRUCTION EQUIPMENT \_\_\_\_\_ LARGE TRACTORS OR  
BUSHHOGS \_\_\_\_\_

SPECIALTY EQUIPMENT \_\_\_\_\_ (GIVE EXAMPLES)

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DID YOU USE DIAGNOSTIC SKILLS: YES \_\_\_\_\_ NO \_\_\_\_\_

DID YOU WORK: UNSUPERVISED \_\_\_\_\_ SUPERVISED \_\_\_\_\_

THIS JOB WAS: FULL-TIME \_\_\_\_\_ PART-TIME \_\_\_\_\_ (HOW MANY HRS PER WEEK)? \_\_\_\_\_

## AUTO MECHANIC WORK EXPERIENCE FORM CONT'D

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NAME : \_\_\_\_\_

PLEASE COMPLETE THIS PAGE FOR EVERY ADDITIONAL MECHANIC JOB. MAKE MORE COPIES IF NEEDED.

### **JOB 2:**

JOB TITLE: \_\_\_\_\_ (MONTH/YEAR) (MONTH/YEAR)  
START DATE \_\_\_\_\_ END DATE \_\_\_\_\_

NAME & ADDRESS OF COMPANY: \_\_\_\_\_

NAME OF SUPERVISOR: \_\_\_\_\_ PHONE# \_\_\_\_\_

DESCRIPTION OF  
DUTIES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **PLEASE CHECK TO INDICATE TYPE OF DUTIES:**

ENGINE/MECHANICAL \_\_\_\_\_ BRAKES \_\_\_\_\_ ELECTRICAL \_\_\_\_\_ COOLING \_\_\_\_\_  
IGNITION \_\_\_\_\_ DRIVE TRAIN \_\_\_\_\_ HYDRAULIC \_\_\_\_\_ INDUCTION (FUEL) \_\_\_\_\_  
FRONT END \_\_\_\_\_ PNEUMATIC \_\_\_\_\_

### **PLEASE CHECK TO INDICATE TYPE OF EQUIPMENT WORKED ON:**

COMPACT OR INTERMEDIATE CARS \_\_\_\_\_ FULL SIZE CARS \_\_\_\_\_ TRUCKS OR  
VANS LESS THAN 8,500 LBS.G.V.W. \_\_\_\_\_ TRUCKS OR VANS 8,500 TO  
20,000 LBS G.V.W. \_\_\_\_\_ TRUCKS OR VANS GREATER THAN 20, 000 LBS  
G.V.W. \_\_\_\_\_ CONSTRUCTION EQUIPMENT \_\_\_\_\_ LARGE TRACTORS OR  
BUSHHOGS \_\_\_\_\_

SPECIALTY EQUIPMENT \_\_\_\_\_ (GIVE EXAMPLES)

DID YOU USE DIAGNOSTIC SKILLS: YES \_\_\_\_\_ NO \_\_\_\_\_

DID YOU WORK: UNSUPERVISED \_\_\_\_\_ SUPERVISED \_\_\_\_\_

THIS JOB WAS: FULL-TIME \_\_\_\_\_ PART-TIME \_\_\_\_\_ (HOW MANY HRS PER WEEK)? \_\_\_\_\_

**AUTO MECHANIC WORK EXPERIENCE FORM CONT'D**

**3**

NAME \_\_\_\_\_

ADDITIONAL INFORMATION FOR ALL JOBS:

PLEASE CHECK YES/NO FOR EACH QUESTION:

Did you use personal tools to perform jobs: YES\_\_\_\_\_ NO\_\_\_\_\_

Have you used pneumatic tools on the job? YES\_\_\_\_\_ NO\_\_\_\_\_

Did you complete formal training courses  
for auto mechanic? YES\_\_\_\_\_ NO\_\_\_\_\_

Did you use service manuals or other guides  
to perform jobs? YES\_\_\_\_\_ NO\_\_\_\_\_

Did you operate diagnostic equipment? YES\_\_\_\_\_ NO\_\_\_\_\_

Was most of your work being done while  
being supervised? YES\_\_\_\_\_ NO\_\_\_\_\_

Did you work with flat rate hours? YES\_\_\_\_\_ NO\_\_\_\_\_

